## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

( Not for submission under 37 CFR 1.99)

Application Number		10596855	
Filing Date		2001-10-31	
First Named Inventor	Tetsu Hada et al.		
Art Unit		2614	
Examiner Name	Maria El-Zoobi		
Attorney Docket Number		NGB-40790	

CERTIFICATION STATEMENT							
Please see 37 CFR 1.97 and 1.98 to make the appropriate selection(s):							
	That each item of information contained in the information disclosure statement was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of the information disclosure statement. See 37 CFR 1.97(e)(1).						
OR							
X	That no item of information contained in the information disclosure statement was cited in a communication from a foreign patent office in a counterpart foreign application, and, to the knowledge of the person signing the certification after making reasonable inquiry, no item of information contained in the information disclosure statement was known to any individual designated in 37 CFR 1.56(c) more than three months prior to the filing of the information disclosure statement. See 37 CFR 1.97(e)(2).						
	See attached certification statement.						
	Fee set forth in 37 CFR 1.17 (p) has been submitted herewith.						
	None						
SIGNATURE A signature of the applicant or representative is required in accordance with CFR 1.33, 10.18. Please see CFR 1.4(d) for the							
	n of the signature.	plicant or representative is required in accord	iance with CFR 1.55, 10.19	o. Flease see CFR 1.4(u) for the			
Signature		/jeffrey j sopko/	Date (YYYY-MM-DD)	2008-09-09			
Name/Print		Jeffrey J. Sopko	Registration Number	26767			
pub 1.14	lic which is to file o	mation is required by 37 CFR 1.97 and 1.98. (and by the USPTO to process) an applicatio s estimated to take 1 hour to complete, include USPTO. Time will vary depending upon the	n. Confidentiality is govern ding gathering, preparing a	ned by 35 U.S.C. 122 and 37 CFR and submitting the completed			

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